

Attachment B Proposed Budget

Line item budget:

Line Item:	AO&GOT Grant Funded	<Insert Other Funding Source>	<Insert Other Funding Source>	% of Total Budget
Personnel	\$			0%
Travel	\$			0%
Services	\$			0%
Commodities	\$			0%
Sub-total:	\$			0%
Overhead				0%
Total	\$			
Total Cost Per Trainee	\$			
Total Cost Per Hour of Instruction	\$			

Narrative:

(Provide a description of the major costs comprised in each line item for each funding source. Add additional columns if needed. Calculate the cost per trainee and the cost per hour of instruction.)